

# UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF FLORIDA

www.flsb.uscourts.gov

## PROOF OF CLAIM

Name of Debtor

**Debit Corporation of America**

Case Number

**04-14360-BKC-AJC**

THIS SPACE IS FOR COURT USE ONLY

NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503. (See Local Rule 3001-1(B))

Name of Creditor (The person or other entity to whom the debtor owes money or property):

**Manuel A. Torres**

Name and Address where notices should be sent:

**547 W 157 ST #67  
New York, NY 10032**

Telephone Number: **917-617-3389**

☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

☐ Check box if you have never received any notices from the bankruptcy court in this case.

☐ Check box if the address differs from the address on the envelope sent to you by the court.

CLERK  
U.S. BANKRUPTCY CT  
SD OF FLA.  
MIA - OFFICE

04 JUN 23 PM 2:09

Account or other number by which creditor identifies debtor:

(If SS# only list last 4 digits of SS#): **# 3950**

Check here if this claim

☐ replaces

☐ amends

a previously filed claim, dated \_\_\_\_\_

### 1. Basis for Claim

☐ Goods sold

☐ Services performed

☐ Money loaned

☐ Personal injury/wrongful death

☐ Taxes

☒ Other

**Breach of Contract**

**Failure to return deposit money invested**

☐ Retiree benefits as defined in 11 U.S.C. § 1114(a)

☐ Wages, salaries, and compensation (fill out below)

Last four digits of SS #: **xxx-xx-**

Unpaid compensation for services performed

from \_\_\_\_\_ to \_\_\_\_\_

(date)

### 2. Date debt was incurred:

**2/25/2004**

### 3. If court judgment, date obtained:

**on Calendar for 8/19/04**

### 4. Total Amount of Claim at Time Case Filed: \$

**9,975**

(Unsecured Nonpriority)

(Secured)

(Unsecured Priority)

**\$9,975**

(Total)

Complete items 5, 6, and 7 (as applicable) to further describe the amount(s) you indicated in item 4.

☐ Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.

### 5. Secured Claim.

☐ Check this box if your claim is secured by collateral (including a right of setoff).

Brief Description of Collateral:

☐ Real Estate ☐ Motor Vehicle

☐ Other

Value of Collateral: \$ \_\_\_\_\_

Amount of arrearage and other charges at the time the case was filed included in secured claim, if any: \$ \_\_\_\_\_

### 6. Unsecured Nonpriority Claim \$

**9,975**

☒ Check this box if: a) there is no collateral or lien securing your claim, or b) your claim exceeds the value of the property securing it, or if c) none or only part of your claim is entitled to priority.

### 7. Unsecured Priority Claim.

☐ Check this box if you have an unsecured priority claim

Amount entitled to priority \$ \_\_\_\_\_

Specify the priority of the claim:

☐ Wages, salaries, or commissions (up to \$4,925), \* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3).

☐ Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4).

☐ Up to \$2,225\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6).

☐ Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7).

☐ Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).

☐ Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(\_\_\_\_).

\*Amounts are subject to adjustment on 4/1/07 and every 3 years thereafter with respect to cases commenced on or after date of adjustment.

This Space is for Court Use Only

8. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.

9. Supporting Documents: Attach legible copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary. Supporting documents should not exceed 5 pages. (See reverse for instructions)

10. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim. Research and/or copy charges will apply for future copy requests of claims.

Date:

**6/23/04**

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):

**Manuel A. Torres**

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

MANUEL A TORRES

Plaintiff

- AGAINST -

DEBIT CORPORATION OF AMERICA

Defendant

SUMMONS WITH

ENDORSED COMPLAINT

BASIS OF VENUE IS:  
PLAINTIFF'S RESIDENCE

PLAINTIFF(S) ADDRESS:

MANUEL A TORRES, 547 W 157TH ST APT 67, NEW YORK NY 10032,  
To the above named defendant(s):  
DEBIT CORPORATION OF  
14895 NE 20TH AVE  
NORTH MIAMI FLA  
33181

**RUSH**

SUMMONS

YOU ARE HEREBY SUMMONED to appear in the Civil Court of the City of New York, County of New York, at the office of the Clerk of the said Court at 111 Centre Street in the County of New York, City and State of New York, within the time provided by law as noted below,\* and to file your answer to the summons with the Clerk. Upon your failure to answer, judgment will be taken against you for the sum of \$9975. with interest thereon from 2/25/04, together with the costs of this action.

Date: April 26, 2004

By:

*[Signature]*  
Chief Clerk, Civil Court

ENDORSED COMPLAINT

The nature and substance of the plaintiff's cause of action is as follows:

FAILURE TO RETURN DEPOSIT  
FAILURE TO RETURN MONEY  
BREACH OF CONTRACT

*Melissa A. Stephens*

*Served acc reev/pay*

*4/30/04*

*Griffith*

*1:55pm*

\*Note to the Defendant

A) If the summons is served by its delivery to you personally within the City of New York, you must appear and answer within **TWENTY** days after such service; or

B) If the summons is served by delivery to any person other than you personally, or is served outside the City of New York, or by publication, or by any means other than personal delivery to you within the City of New York, you are allowed **THIRTY** days after the proof of service of this summons is filed with the Clerk of this Court within which to appear and answer.

C) Following CPLR 321(a) corporations must be represented by an attorney.

- NOTE TO THE SERVER OF THE SUMMONS -

The person who serves the Summons should complete the Affidavit of Service and file it in the Clerk's Office within **FOURTEEN DAYS** after service of the Summons on the defendant.

PLAINTIFF'S CERTIFICATION  
(SEE NYCRR, SECTION 130-1.1a)

SIGN NAME X MANUEL A. TORRES

PRINT NAME Manuel A. Torres

*Handwritten Circ*  
*VOS - GFX*

*The owner of this car is the person*  
*I served. Young white*  
*Blonde, petite, she is acc. To*

MANUEL A TORRES

Plaintiff

- AGAINST -

DEBIT CORPORATION OF AMERICA

Defendant

AFFIDAVIT OF SERVICE OF  
SUMMONS W/ENDORSED COMPLAINT

State of New York, County of \_\_\_\_\_ :

\_\_\_\_\_, being duly sworn, deposes and says:  
(Name of Server)

I am over 18 years of age and not a party to this action. At \_\_\_\_\_AM/PM,  
(Time)

on \_\_\_\_\_ at \_\_\_\_\_ in the County of \_\_\_\_\_,  
(Date) (Address)

City of New York, I served the attached SUMMONS WITH ENDORSED COMPLAINT  
in this matter on DEBIT CORPORATION OF AMERICA by  
delivering the said SUMMONS WITH ENDORSED COMPLAINT to:

\_\_\_\_\_, who is:  
(Name of actual person with whom the SUMMONS was left)

[ ] the said defendant in person,

or

[ ] known to me to be the \_\_\_\_\_ of the \_\_\_\_\_  
(Title) (Corporation/Partnership)

-----  
\* Description of actual person with whom SUMMONS was left: \*  
\* \*  
\* Sex:\_\_\_\_\_ Color of Skin:\_\_\_\_\_ Color of Hair:\_\_\_\_\_ \*  
\* \*  
\* Approximate Age:\_\_\_\_\_ Approximate Weight:\_\_\_\_\_ Approximate Height:\_\_\_\_\_ \*  
-----

\_\_\_\_\_  
(Signature of Server)

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Notary Public or Court Employee and Title)

CIV-GP-18 (5/90) VER.DS

**AFFIDAVIT OF SERVICE**

State of New York

County of New York

Circuit Court

Index Number: 023084 CVN 2004

Date Filed: \_\_\_\_\_

Plaintiff:

**MANUEL A. TORRES.,**

vs.

Defendant:

**DEBIT CORPORATION OF AMERICA.,**

For:

Manuel Torres

(PRO SE)

547 W. 157 Street

#67

New York, NY 10032

Received by FLORIDA PROCESS SERVICE, INC. on the **30th day of April, 2004** at **11:23 am** to be served on **DEBIT CORPORATION, 14895 N.E. 20th AVE. NORTH MIAMI, FL. 33181.**

I, Frank Trujillo, being duly sworn, depose and say that on the **30th day of April, 2004** at **1:55 pm**, I:

**SERVED** the within named CORPORATION by delivering a true copy of the **SUMMONS and COMPLAINT** with the date and hour of service endorsed thereon by me to **MELISSA A. STEPHENS** as **AUTHORIZED TO ACCEPT** of the within named corporation, in compliance with F.S. 48.081.(1)(a)(b)(c)(d)(3)

**Description of Person Served:** Age: 25, Sex: F, Race/Skin Color: White, Height: 5'6, Weight: 125, Hair: Blonde, Glasses: N

I do hereby certify that I have no interest in the above action, that I am over the age of eighteen, and that I am a Certified Process Server in good standing in the circuit in which it was served.

Subscribed and Sworn to before me on the 10th day of May, 2004 by the affiant who is personally known to me.

NOTARY PUBLIC



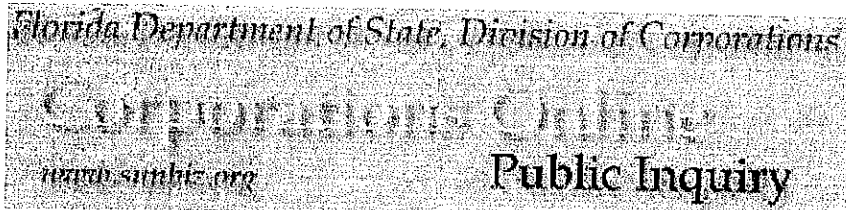
Rademir Domenech  
My Commission DD226328  
Expires July 15, 2007

A handwritten signature in cursive script, reading "Frank Trujillo", written over a horizontal line.

Frank Trujillo  
C.P.S. # 1284

**FLORIDA PROCESS SERVICE, INC.**  
P.O. Box 013366  
Miami, FL 33101-3366  
(305) 371-9900

Our Job Serial Number: 2004002712



## Florida Profit

**DEBIT CORPORATION OF AMERICA, INC.**

**PRINCIPAL ADDRESS**  
14895 N.E. 20 AVENUE  
NORTH MIAMI FL 33181 US  
Changed 04/15/2004

**MAILING ADDRESS**  
14895 N.E. 20 AVENUE  
NORTH MIAMI FL 33181 US  
Changed 04/15/2004

**Document Number**  
P00000091595

**FEI Number**  
134230404

**Date Filed**  
09/28/2000

**State**  
FL

**Status**  
ACTIVE

**Effective Date**  
NONE

**Last Event**  
AMENDMENT

**Event Date Filed**  
02/24/2004

**Event Effective Date**  
NONE

**Registered Agent**

Name & Address	
CREATIVE ASSET PROTECTION STRATEGIES, INC 16191 NW 57TH AVE MIAMI FL 33014	
Name Changed: 02/23/2004	
Address Changed: 02/23/2004	

**Officer/Director Detail**

Name & Address	Title
MARTIN, WILLIAM S 11900 BISCAYNE BLVD., SUITE 699 MIAMI FL 33181 US	PSTD